



Add account holder(s) to an existing account

Section 1. Account details

Account name:

Account number

Section 2. Personal details of the new account holder(s)

New Applicant 1

Title (e.g. Mr, Mrs, Miss, Dr)

First name(s)

Surname(s)

Are you an existing customer of Alliance & Leicester International? Yes No
 If yes, please enter your existing account number(s) below.

Account number

Gender Male Female

Maiden name or any other name(s)

Date of birth

Nationality

Country of birth

Town of birth

Dual nationality (if applicable)

Full permanent residential address inc. postcode
 (A PO Box or c/o address is not acceptable as a residential address)

Postcode

What date did you move in?

New Applicant 2

Title (e.g. Mr, Mrs, Miss, Dr)

First name(s)

Surname(s)

Are you an existing customer of Alliance & Leicester International? Yes No
 If yes, please enter your existing account number(s) below.

Account number

Gender Male Female

Maiden name or any other name(s)

Date of birth

Nationality

Country of birth

Town of birth

Dual nationality (if applicable)

Full permanent residential address inc. postcode
 (A PO Box or c/o address is not acceptable as a residential address)

Postcode

What date did you move in?

The Santander Group has more than 150 years' experience in banking, and more branches worldwide than any other international bank.

Section 2. Personal details of the new account holder(s) – continued**New Applicant 1**

Correspondence address (if different from residential address)

Postcode

Country of tax residence

Tax identification number (if available)

Home phone number - including area code (optional)

Home fax number - including area code (optional)

Mobile phone number (optional)

Email address (optional)

What is your relationship with the other applicant(s)?

New Applicant 2

Correspondence address (if different from residential address)

Postcode

Country of tax residence

Tax identification number (if available)

Home phone number - including area code (optional)

Home fax number - including area code (optional)

Mobile phone number (optional)

Email address (optional)

What is your relationship with the other applicant(s)?

Section 3. Current employment details**New Applicant 1**

What is your current employment situation?

- Employed Unemployed Self-employed
 Retired Student Homemaker

Employer's name/name of your business

Position held

Nature of business

Work phone number - including area code (optional)

New Applicant 2

What is your current employment situation?

- Employed Unemployed Self-employed
 Retired Student Homemaker

Employer's name/name of your business

Position held

Nature of business

Work phone number - including area code (optional)

Section 4. Additional information

Since Alliance & Leicester International Limited became part of Santander Group we have been aligning our standards and policies to those of our parent company, and as such require the following details. Once we are in receipt of the information we shall update your personal details on our records. Any information received is treated in confidence under the Terms and Conditions of your account(s) and the information provided in this section will not be used for marketing purposes.

Income: please indicate the approximate value of your gross annual income, deleting the currencies not applicable. Evidence of your primary source of income will be required as per section 7C of this application form, for each applicant.

1st Applicant

Earned income	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>
Pensions	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>
Interest received on savings/investments	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>
Other (including trusts)	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>

2nd Applicant

Earned income	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>
Pensions	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>
Interest received on savings/investments	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>
Other (including trusts)	<input type="checkbox"/> None	<input type="text" value="£/€/US\$"/>

Section 5. Your information

Personal information and data protection

Information you provide on this application form may be held on computer by Alliance & Leicester International Limited and will be used only for purposes registered under the Data Protection Act, including administration, research, analysis, keeping you informed of related products and services from members of the Santander Group. Please note that no information is passed by us to any third party for marketing purposes. Information about you will be kept after your account is closed. You have the right to see certain records held by us on payment of a fee. If you wish to exercise this right you should write to the Manager, Data Protection, Alliance & Leicester International Limited, PO Box 226, 19/21 Prospect Hill, Douglas, Isle of Man, IM99 1RY, British Isles.

If you would prefer not to be contacted about products and services (other than with statements, transaction advices and account specific correspondence) please opt not to receive this information by ticking this box.

I/We do **not** wish to receive this information.

Section 6. Sign here – all applicants

I/We understand that, if we are resident in the EU or become so in future, under legislation relating to the European Union Savings Tax Directive, Alliance & Leicester International is required to send information on interest paid to me/us together with my/our details to the Isle of Man tax authority so that this information can be passed to the EU tax authority in my/our country of residence.

I/We declare that the information given is true and correct and I/we authorise the Bank to obtain independent verification of any information provided.

Please note:

- All correspondence will be addressed to the first-named account holder only.
- In the event of death, where an account is held in joint names, the account is vested to the survivor(s).
- Where no preference is indicated to the Bank, we shall assume that any account holder may sign for withdrawals and for any other purpose in connection with this account.

I/We confirm that I/we have read and understood the current General Terms and Conditions and the Special Conditions applying to the account and agree to be bound by them.

New Applicant 1

Signature

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

New Applicant 2

Signature

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Signature mandate

I/We authorise Alliance & Leicester International Limited to add the above named account holder(s) to my/our account.

I/We agree that Alliance & Leicester International Limited is authorised until further notice to accept:

All of our signatures

Either of our signatures

as a discharge for withdrawals or for any other purpose in connection with this account.

Please ensure that your signature mandate complies with the Special Conditions of

Existing Account Holder 1

Signature

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Existing Account Holder 2

Signature

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Section 7. Documents you will need to provide

We are required to verify your identity in order to comply with our Group and regulatory requirements. We ask you to provide evidence of the following items (a copy of which will be retained for our records) from Sections A, B & C when opening an account. Occasionally, we may also request documentation from Section D overleaf. Where you are not able to provide the requested information, we may be unable to open your account, however, we may still be able to help. Please call into the branch or contact us on **+44 (0) 1624 641 888** for further advice.

Section A - Photographic identification

For **EACH APPLICANT**, please provide a clearly legible certified photocopy of the relevant pages of your current valid passport. If you do not have a passport, please contact us. We reserve the right to seek additional proof of identity documents at any time.

Certification of the copied documents

Documents need to be certified by a professional person who is independent of the individual for whom the account is being opened i.e. cannot be a family member or associated in any way with the account. Acceptable certifiers are:

- Qualified lawyer
- Qualified accountant
- Bank manager
- Serving police officer
- Government official
- Consular official of an Embassy, High Commission or Consulate of the country of issue of the document.

The copy must clearly show the numbered items below.



1. Name of applicant
2. Clearly legible photograph of the applicant
3. Date and place of birth clearly shown
4. Passport must be valid (not out of date)
5. Passport holder's signature
6. Nationality of the passport holder.

Section B - Residential address confirmation

Please provide an original or certified copy of one on the following documents which is **not more than 6 months old**. The document must show your permanent residential address and preferably your full name. If it is a certified copy, it must be certified by one of the professional persons named in Section A.

For security reasons, we recommend that you send certified copies of these documents instead of the originals as we cannot guarantee their safe receipt or return. We reserve the right to request further verification documents at any time.

Please note: documents addressed to PO Box numbers are not normally acceptable. By exception, where PO Box facilities are used for the reasons of safety/security, or where there is no local residential postal delivery system, where documents in this section quote a PO Box number, they may be acceptable. Please contact us if you are unsure.

Acceptable documents are:

- Bank statement (not issued by Alliance & Leicester International)*
- Building Society statement*
- Utility bill for fixed services (documents issued in a language other than English must be supported by a full English translation and also be certified)*
- Local rates assessment or local taxes bill
- Personal tax assessment
- Insurance company document which quotes the policy number and is not a motor insurance policy.

* We are not able to accept documents printed from a website.

Section C - Income verification

Please provide an original or certified copy of one on the following documents which shows details of your primary income(s). These must be **no more than 6 months old**.

Acceptable documents are:

- Audited accounts*
- Wage slip or other wage notification
- Correspondence with a central or local tax office confirming income*
- Bank or investment statement confirming level of savings or investments where income is earned*.

* We are not able to accept documents printed from a website.

Section 7. Documents you will need to provide – continued

Section D - Wealth verification (when requested by us)

Source of wealth describes the origins of a customer’s financial standing or total net worth i.e. those activities which have generated a customer’s funds and property.

Examples of source of wealth documents may include a Solicitor’s Letter; evidence of long-term savings or contract notes from the sale of investments. We will contact you directly if we require evidence of your source of wealth prior to the account being opened.

We reserve the right to request documentary evidence at any future time during the lifetime of the account. Please contact us if you would like confirmation on the likelihood of our request for such evidence.

If you do not provide the relevant information, there may be a delay in opening your account.

Section E - Certifier’s details (mandatory)

Full name

Gender Male Female

Profession

Title or position

Professional body & qualifications (where applicable)

Email address

Name & address of certifier’s employer

 Postcode

Fax number

Employer’s telephone number

Website address

Section F - Certifier’s guide

The certified copy must clearly show the numbered items below.



1. Name of applicant
2. Clearly legible photograph of the applicant
3. Date and place of birth clearly shown
4. Passport must be valid (not out of date)
5. Passport holder’s signature
6. Nationality of the passport holder.

The certified wording used must state that:

1. The document is a true copy of the original and;
2. The photograph is a true likeness of the individual concerned.

Below is an example of the required certification wording showing the certifier’s signature and stamp:

04 January 2012

I certify that this is a true copy of the original and that the photograph is a true likeness of the individual concerned.

Signed
Elisabeth V. Perroni

ELISABETH V. PERRONI
 THE CITY BANK
 PERTH
 WESTERN AUSTRALIA

ELISABETH V.PERRONI
 Managing Director
 The City Bank, 299 Central Boulevard, Perth,
 Western Australia 6000
 Tel 00 91 5 963901.

The certified photocopy of the address verification should include:

- Name and address of the applicant
- Date of the document, which must **not be more than 6 months old.**

Documents issued in a language other than English must be supported by a full English translation and also be certified.

Section 8. Checklist – for new account holder(s)

Please use this checklist to make sure you are sending the correct documents to add new account holder(s). An incomplete form or lack of supporting documentation may prevent us from actioning your request.

- This form has been fully completed to the best of your ability.
- Correctly certified proof of identity for **each** new party. Please see the 'Documents you will need to provide' guide (section 7A) included overleaf for details of who is eligible to certify your documents.
- Original** or **certified copy** of permanent residential address (in English and no more than 6 months old). Please see the 'Documents you will need to provide' guide (section 7B) for details of what is acceptable as proof of address.
- Original** or clearly legible **photocopy** for each of your primary source of income (no more than 6 months old). This should relate to the primary income you provided in section 4. Please see the 'Documents you will need to provide' guide in (section 7C) for details of what is acceptable as source of income.

Call **+44 (0) 1624 641888** or click **alil.co.im**

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